



DUTCHESS COUNTY
 DEPARTMENT OF BEHAVIORAL & COMMUNITY HEALTH
 Environmental Health Services Division
 85 Civic Center Plaza – Suite 106, Poughkeepsie, NY 12601
 Tel: (845) 486-3404 Fax: (845) 486-3545

CERTIFICATION OF FILL FOR SEWAGE DISPOSAL SYSTEMS

Instructions: Engineer: Complete Sections A through D and submit form to the Dutchess County Department of Behavioral & Community Health. You may attach test result forms (e.g. HD-184) to this form. See back for further instructions.

SECTION A. PROJECT INFORMATION

Subdivision or Project Name _____ Lot Number _____
 Tax Map # _____ Filed Map # _____ Location _____
 Town Village City

SECTION B. PERMEABLE FILL

Length _____ Width _____ Depth _____ Has fill been stabilized? Yes No.
 Is fill in location shown on map? Yes No. Finished slope of pad _____ Soil Type _____
 Is there an indication that the SDS area has been regraded or otherwise disturbed prior to the placement of the fill?
 Yes No. Explain: _____
 Adequate quality? Yes No. Method of determination _____

SECTION C. IMPERVIOUS FILL

Soil Type _____ Adequate amount? Yes No. Side slope _____
 Is there adequate separation from the toe of slope to the property line? Yes No
 Adequate quality? Yes No. Method of determination _____

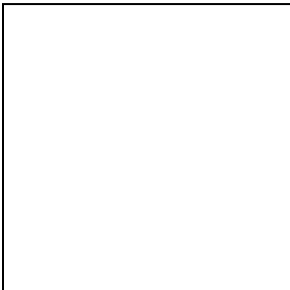
SECTION D. CERTIFICATION

I, _____, hereby certify that the above statements are correct and that to the best of my knowledge and in my professional opinion the installation of the sewage disposal fill pad has been completed satisfactorily in conformance with the approved plan.*

Inspection dates: _____

 (Signature) (Date)

License No. _____



seal

*Any deviations from the approved plan must be listed and justified on the back of this form.



For Office Use Only

Reviewed by _____ Date _____ EDITS Project No.

Directions:

By field.

SECTION A

Subdivision/Project Name: *Use approved name; do not use marketing names.*

Lot Number: *If present. Some individual lots may not have a number. Do not use mailing address numbers.*

Tax Map Number: *For the exact lot; do not use the parent parcel or original subdivision number.*

Filed Map Number: *If available. Some individual lots may not be filed.*

Location: *Town, Village, or City. Do not use post office.*

SECTION B

Length, Width, and Depth of the permeable fill: *Measure the top of pad.*

Is fill stabilized: *Was the fill placed in lifts, compacted, or otherwise allowed to settle?*

Soil Type: *Use standard USDA terms.*

Indication of regrading: *Note any scarification which was performed.*

Method of Determination: *How did you determine that the fill was satisfactory? NY Standard Percolation tests should be done according to our published protocol and submitted on Form HD-184 (or equivalent).*

SECTION C

Soil Type: *Use standard USDA terms.*

Adequate amount: *Has at least as much impervious been placed as called for upon the approved plans? Standard minimum thickness is 2 feet. Has at least enough impervious been placed to prevent break out of sewage from side slopes?*

Side slope: *List slope in percent, degrees, or radians. Standard minimum is 1v on 3h. Note if impervious has been keyed as per plan.*

Adequate separation: *Is fill installed in location shown on plan? If additional regrading was performed, is impervious still properly separated from the property line, wells, and/or wet areas? Standard distance to property lines is 10 feet.*

Comments: